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Elaine N. Walker, Secretary of State Received and Filed: 3/24/2011 12:44 PM

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## COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

Division of Corporations Business Filings PO Box 718 Frankfort, KY 40602	Articles of Organiz Limited Liability Co			KLC
(502) 564-3490 www.sos.ky.gov			•	
Pursuant to KRS 14A and KRS 2	275, the undersigned appl	ies to qualify and for that pu	urpose submits the follo	owing statements:
Article I: The name of the limited				
	rms LLC			
Article II: The street address of	the limited liability compar	ny's initial registered office i	n Kentucky is	477112
235 ELMORE Street Address Daily (No Post Office I	HODGES KO	City CIKEENSIS	State	Zip Gode
and the name of the initial regist			HODGES	
Article III: The mailing address	of the limited liability comp	oany's initial principal office	is	
235 ELMORE Street Address or Post Office Box No.	HODGES RO	AD GREENSE	State	<u>42743</u> Zlp Code
Article IV: The limited liability of	ompany is to be managed	by (must check one):		
A. a manager(s).				
B. its member(s).				
Article V: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective				
date or the delayed effective da	ite cannot be prior to the o	date the application is filed.	The date and/or time	(Delayed affective date and/or time)
I/We declare under penalty of p	perjury under the laws of t	ne state of Kentucky that th	e foregoing is true and	correct.
Bethana H	529-		>GES, MEMBEL	
Signature of Organizer Signature of Organizer	Thomas Herry	William Bradley Thor Printed Name & Title	xs Hodge Maber	03-21-11 Date
'7	DGES	, consent to serve as the registere	d agent on behalf of the limit	led liability company.
Print Name of Registered Agent  Between Agent  Signature of Registered Agent	odgs	BETHANA   Printed Name	ODGES 03	5-21-11

(01/11)